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STATEMENT OF ORGANIZATION

(See instructions)

	(See instructions)		Office use only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5
Constitutional Conservatives Fund			
ADDRESS (number and street) 228 S. Washington St., Ste. 115			
(Check if address is changed)			
	Alexandria		VA 22314
		CITY	STATE ZIP CODE
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)			
(Check if address is changed)	llisker@hdafec.com	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
		<u> </u>	
COMMITTEE'S WEB PAGE ADDRESS (URL)			
(Check if address is changed)			
- 10 Shangasa,	سسسس		
2. DATE MOM / DOD / Y Y Y Y Y			
3. FEC IDENTIFICATION NUMBER			
4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)			
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete .			
Type or Print Name of Treasurer Lisa Lisker			
Chuk Col			
Signature of Treasurer Electronically Eiled by Lisa Lisker Date D. 6 09 30 11			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.			
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS			
Office Use Only		For further information co Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	